

POSITION	ID NO.	DATE
CLASSIFIER	57	1-7-98
EXAMINER		
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST WAY INC. ATTORNEY

INDEX OF CLAIMS

Claim	Date
Final	12/7
Original	6/9/92
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SYMBOLS

- ✓ Rejected
- = Allowed
- (Through numberal) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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